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| apter you are filing under:                |
|--|
| Chapter 7                                  |
| Chapter 11                                 |
| Chapter 12                                 |
| Chapter 13 Check if this an amended filing |
| c  |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1:                 | Identify Yourself   |  |   |   |
|-----|-----------------------|---|--|---|---|
|     |                       |   | About Debtor 1:                                  | , | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | You                   | r full name   |  |   |   |
|     | your<br>pictu<br>exar | e the name that is on<br>government-issued<br>are identification (for<br>nple, your driver's<br>ase or passport). | Barbara First name  M Middle name                |   | First name  Middle name                       |
|     | iden                  | g your picture<br>tification to your<br>ting with the trustee.  | Alluri  Last name and Suffix (Sr., Jr., II, III) | 1 | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  |                       | other names you have<br>d in the last 8 years   |  |   |   |
|     |                       | de your married or<br>den names.  |  |   |   |
| 3.  | you<br>num<br>Indi    | y the last 4 digits of<br>r Social Security<br>aber or federal<br>vidual Taxpayer<br>tification number            | xxx-xx-4870                                      |   |   |

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Debtor 1 Barbara M Alluri

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 605 Barrington Avenue, Apt. 142 East Dundee, IL 60118 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Kane County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one:

#### Why you are choosing this district to file for bankruptcy

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case number (if known)

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Case number (if known) Debtor 1 Barbara M Alluri

| ar  | Tell the Court About  | Your B      | ankruptcy Ca                                       | ise   |  |  |   |  |  |
|-----|---|-------------|--|---|--|--|---|--|--|
| 7.  | The chapter of the Bankruptcy Code you are  |             |  |   | of each, see <i>Notice</i> page 1 and check the                    |  | § 342(b) for Individuals Filir  | ng for Bankruptcy                              |  |
|     | choosing to file under  | ☐ Chapter 7 |  |   |  |  |   |  |  |
|     |   | □ с         | hapter 11  |   |  |  |   |  |  |
|     |   | □ с         | hapter 12  |   |  |  |   |  |  |
|     |   | ■ CI        | hapter 13  |   |  |  |   |  |  |
| 3.  | How you will pay the fee  |             | about how yo                                       | u may pay. Typi<br>attorney is subn                       | ically, if you are payi  | ng the fee yourself, yo  | clerk's office in your local co<br>u may pay with cash, cashie<br>ttorney may pay with a cred                               | er's check, or money                           |  |
|     |   |             |  |   | allments. If you chos (Official Form 103A                          |  | nd attach the Application for   | Individuals to Pay                             |  |
|     |   |             | I request that<br>but is not req<br>applies to you | at my fee be wa<br>uired to, waive y<br>ur family size an | ived (You may reque<br>your fee, and may do<br>d you are unable to | est this option only if your income only if your income only if your income only the fee in installment. | ou are filing for Chapter 7. Be is less than 150% of the offents). If you choose this option 103B) and file it with your pe | ficial poverty line that on, you must fill out |  |
|     |   |             |  |   |  |  |   |  |  |
| ).  | Have you filed for<br>bankruptcy within the   | ■ No        | ).   |   |  |  |   |  |  |
|     | last 8 years?   | ☐ Ye        | es.  |   |  |  |   |  |  |
|     |   |             | District   |   | Whe  | n  | Case number   |  |  |
|     |   |             | District   |   | Whe  | n  | Case number   |  |  |
|     |   |             | District   |   | Whe  | n  | Case number   |  |  |
| 10. | Are any bankruptcy cases pending or being   | ■ No        | )  |   |  |  |   |  |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Ye        | es.  |   |  |  |   |  |  |
|     |   |             | Debtor   |   |  |  | Relationship to you   |  |  |
|     |   |             | District   |   | Whe  | n  | Case number, if known   |  |  |
|     |   |             | Debtor   |   |  |  | Relationship to you   | -  |  |
|     |   |             | District   |   | Whe  | n  | Case number, if known   |  |  |
| 11. | Do you rent your residence?   | ■ No        | Go to I  | ine 12.   |  |  |   |  |  |
|     | residence :   | □ Ye        | es. Has yo   | ur landlord obta  | ined an eviction judg  | ment against you and   | do you want to stay in your   | residence?                                     |  |
|     |   |             |  | No. Go to line 1  | 12.  |  |   |  |  |
|     |   |             |  | Yes. Fill out <i>Ini</i> bankruptcy peti                  |  | an Eviction Judgment   | t Against You (Form 101A) a   | nd file it with this                           |  |
|     |   |             |  | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                   |  |  |   |  |  |

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Document Page 4 of 48 Case number (if known) Debtor 1 Barbara M Alluri Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Barbara M Alluri

ara M Alluri Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 48 Case number (if known) Debtor 1 Barbara M Alluri Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do vou **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Barbara M Alluri Signature of Debtor 2 Barbara M Alluri Signature of Debtor 1 Executed on December 20, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Barbara M Alluri Page 7 of 48 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Maura       | G. Zalc #              | Date          | December 20, 2016    |
|-----------------|------------------------|---------------|----------------------|
| Signature of    | Attorney for Debtor    |               | MM / DD / YYYY       |
| Maura G. 2      | Zalc #                 |               |                      |
| Printed name    |                        |               |                      |
| Bernicky I      | Law Firm               |               |                      |
| Firm name       |                        |               |                      |
| 1001 E. CI      | nicago Ave             |               |                      |
| Suite 121       |                        |               |                      |
| Naperville      | , IL 60540             |               |                      |
| Number, Street, | City, State & ZIP Code |               |                      |
| Contact phone   | 630-909-9902           | Email address | info@BernickyLaw.com |
| 6307384         |                        |               |                      |
| Bar number & S  | tate                   |               |                      |

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|                     |                          | Docume            | nt Page 8 of 48 |  |
|---------------------|--------------------------|-------------------|-----------------|--|
| Fill in this infor  | mation to identify your  | case:             |                 |  |
| Debtor 1            | Barbara M Alluri         |                   |                 |  |
|                     | First Name               | Middle Name       | Last Name       |  |
| Debtor 2            |                          |                   |                 |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name       |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS     |  |
| Case number         |                          |                   |                 |  |

### Official Form 106Sum

(if known)

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|     |  | Your as     | ssets<br>f what you own       |
|-----|--|-------------|-------------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 56,382.00                     |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 6,949.00                      |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 63,331.00                     |
| Pai | t 2: Summarize Your Liabilities  |             |                               |
|     |  |             | <b>abilities</b><br>t you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 0.00                          |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$          | 0.00                          |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 31,485.00                     |
|     | Your total liabilities   | \$          | 31,485.00                     |
| Paı | t 3: Summarize Your Income and Expenses  |             |                               |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 2,711.80                      |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 2,461.10                      |
| Paı | t 4: Answer These Questions for Administrative and Statistical Records   |             |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | r other sch | nedules.                      |
|     | ■ Yes What kind of debt do you have?   |             |                               |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

☐ Check if this is an amended filing

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11: <b>OR</b> Form 122B Line 11: <b>OR</b> Form 122C-1 Line 14 |    |
|----|---|----|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.   | \$ |

2,711.80

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

|                      | (  | Case 16-40009  | Doc 1  | Filed 12/21/16<br>Document                             | Entered 12/21/1<br>Page 10 of 48   | .6 11:42:57                     | Desc  | Main   |  |
|----------------------|--|--|--|--|--|---------------------------------|---|--|--|
| Fill                 | in this inf  | ormation to identify y                                 | our case and t   |  | 1 000 40 01 10   |                                 |   |  |  |
| Deb                  | otor 1   | Barbara M Al   | luri   |  |  |                                 |   |  |  |
| <b>D</b> - I         | 0  | First Name   | Mido   | lle Name   | Last Name  |                                 |   |  |  |
|                      | otor 2<br>use, if filing)  | First Name   | Mido   | lle Name   | Last Name  |                                 |   |  |  |
| Uni                  | ted States   | Bankruptcy Court for t                                 | he: NORTHE   | RN DISTRICT OF ILLI                                    | NOIS   |                                 |   |  |  |
| Cas                  | se number  |  |  |  | _  |                                 |   |  |  |
|                      |  |  |  |  |  |                                 |   | amended filing   |  |
| n ea<br>hink<br>nfor | chedu<br>ch category<br>it fits best<br>mation. If m<br>ver every qu | Be as complete and actore space is needed, at lestion. | scribe items. Lis<br>ccurate as possil<br>ttach a separate | ole. If two married peopl<br>sheet to this form. On th | an asset fits in more than one<br>le are filing together, both are<br>ne top of any additional pages | equally responsib               | ole for suppl   | lying correct  |  |
| Part                 | 1: Descri  | be Each Residence, Bui                                 | ilding, Land, or C   | Other Real Estate You O                                | wn or Have an Interest In  |                                 |   |  |  |
|                      | No. Go to I  | , , ,  | mable interest in  | any residence, building                                | g, land, or similar property?  |                                 |   |  |  |
| 1.1                  |  |  |  | What is the propert                                    | ty? Check all that apply   |                                 |   |  |  |
|                      |  | rington Avenue, A                                      | <u> </u>   | _  | home<br>Ilti-unit building<br>n or cooperative   | the amount of ar                | ny secured cl   | s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property. |  |
|                      | Dundee   | <b>IL</b><br>State                                     | 60118-0000<br>ZIP Code                                     | Manufactured Land Investment p                         | d or mobile home   | Current value o entire property | ? p   | Current value of the portion you own?                                |  |
|                      | City   | State  | ZIF Code   | ☐ Timeshare ☐ Other                                    | st in the property? Check one  | Describe the na                 | e the nature of your ownership interest<br>fee simple, tenancy by the entireties, or<br>ate), if known. |  |  |
|                      | County   |  |  | Debtor 2 only Debtor 1 and At least one of             | Debtor 2 only of the debtors and another you wish to add about this ite                              | (see instruction                |   | unity property   |  |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$56,382.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Document Page 11 of 48 Case number (if known) Debtor 1 Barbara M Alluri 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Chevrolet Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **Impala** ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model 2006 Year: Debtor 2 only Current value of the Current value of the 100000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$1,880.00 \$1,880.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$1,880.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Necessary used household items. \$100.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No ■ Yes. Describe..... Television \$50.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No

Case 16-40009

Doc 1

Filed 12/21/16

Entered 12/21/16 11:42:57

Desc Main

|                   |                       | Case 16-40                                   | 009                   | Doc 1                           | Filed 12/21/16<br>Document   | Entered 1<br>Page 12 of | 2/21/16 11:42:57                | Desc Main   |
|-------------------|-----------------------|--|-----------------------|---------------------------------|--|-------------------------|---------------------------------|---|
| Debto             | r 1                   | Barbara M Allu                               | ıri                   |                                 | Document   |                         | Case number (if known)          |   |
|                   | Yes.                  | Describe                                     |                       |                                 |  |                         |                                 |   |
|                   | <i>xamp</i><br>No     |  | es, furs,             | , leather coats                 | s, designer wear, shoes  | , accessories           |                                 |   |
|                   |                       | [N   | locoss                | ary used cl                     | othing   |                         |                                 | \$100.00  |
|                   |                       | <u> </u>                                     | 100033                | ary used cr                     | ouning.  |                         |                                 |   |
| <b>=</b> 1        | xamp<br>No            |  | Iry, cost             | ume jewelry, e                  | engagement rings, wed  | ding rings, heirlooi    | m jewelry, watches, gems, g     | old, silver   |
| <i>E</i> :<br>■ 1 | <i>xamp</i><br>No     | rm animals  bles: Dogs, cats, bird  Describe | ds, hors              | es                              |  |                         |                                 |   |
| 14. <b>A</b> n    | ıy oth                | ner personal and h                           | ouseho                | old items you                   | ı did not already list, i  | ncluding any hea        | Ith aids you did not list       |   |
|                   | No                    | -  |                       | -                               | • •  |                         | ·                               |   |
| □`                | Yes.                  | Give specific inform                         | nation                |                                 |  |                         |                                 |   |
|                   |                       |  |                       |                                 | om Part 3, including a   |                         | ges you have attached           | \$250.00  |
| Part 4:           | Des                   | scribe Your Financial                        | l Assets              |                                 |  |                         |                                 |   |
| Do yo             | u ow                  | n or have any lega                           | al or eq              | uitable intere                  | est in any of the follow   | ring?                   |                                 | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| <b>=</b> 1        | <i>xamp</i><br>No     |  | -                     |                                 | our home, in a safe depo   |                         | and when you file your petition | on  |
|                   |                       |  |                       |                                 | I accounts; certificates on ounts with the same ins                      |                         | in credit unions, brokerage h   | nouses, and other similar   |
| □ ·               |                       |  |                       |                                 | Institution r  | name:                   |                                 |   |
| _                 | 165                   |  |                       |                                 |  |                         |                                 |   |
|                   |                       |  | 17.1.                 | Checking                        | Chase  |                         |                                 | \$1,000.00  |
| E:<br>■ I         | <i>xamp</i><br>No     | mutual funds, or poles: Bond funds, inv      | estmer                |                                 | th brokerage firms, mor  | ney market accoun       | nts                             |   |
| jo                | int ve                | iblicly traded stock<br>enture               | k and ir              | nterests in in                  | corporated and unince  | orporated busine        | sses, including an interes      | t in an LLC, partnership, and   |
| <b>■</b> (        |                       | Give specific inform                         |                       | bout them<br>e of entity:       |  |                         | % of ownership:                 |   |
| N<br>N<br>1 ■     | egotia<br>on-ne<br>No | <i>able instrument</i> s inc                 | clude pe<br>ts are th | ersonal checks<br>lose you cann | negotiable and non-nos, cashiers' checks, pro<br>not transfer to someone | missory notes, and      | d money orders.                 |   |

| Debtor 1                | Case 16-40009   | Doc 1                            | Filed 12/21/16<br>Document           | Entered 12/21/1<br>Page 13 of 48   | 6 11:42:57 number (if known) | Desc Main   |
|-------------------------|---|----------------------------------|--------------------------------------|--|------------------------------|---|
|                         |   | er name:                         |                                      |  | (                            |   |
|                         | ement or pension accounts<br>apples: Interests in IRA, ERIS                               |                                  | 1(k), 403(b), thrift saving          | s accounts, or other pensio  | n or profit-sharing p        | olans   |
| ■ Yes                   | . List each account separate<br>Type o  | ely.<br>f account:               | Institution n                        | ame:   |                              |   |
|                         | Pensi   | on                               | Internatio<br>National I<br>455 Keho | Communications Confe<br>nal Brotherhood of Tea<br>Pension Fund<br>e Boulevard, Ste. 101<br>eam, IL 60188 |                              | Unknown   |
|                         | Pensi   | on                               | 455 Keho                             | al Pension Fund<br>e Blvd., Ste. 100<br>eam, IL 60188  |                              | Unknown   |
| Your :<br>Exam          | ity deposits and prepayme<br>share of all unused deposits<br>aples: Agreements with landl | you have m                       |                                      |  |                              | ies, or others  |
| ■ No<br>□ Yes           |   |                                  | Institution n                        | ame or individual:   |                              |   |
| ■ No □ Yes  24. Interes | sts in an education IRA, in   | and descrip                      | in a qualified ABLE pro              | ·  | ,                            | gram.   |
| ■ No                    | .C. §§ 530(b)(1), 529A(b), a  |                                  |                                      | ne records of any interests.1  | 11 U.S.C. § 521(c):          |   |
| ■ No                    | s, equitable or future intere   |                                  | erty (other than anythin             | g listed in line 1), and righ  | nts or powers exe            | rcisable for your benefit   |
| 26. Paten<br>Exam       | ts, copyrights, trademarks apples: Internet domain name                                   | s, trade secre<br>s, websites, p |                                      |  |                              |   |
| Exam<br>■ No            | ses, franchises, and other nples: Building permits, exclu                                 | usive licenses                   |                                      | n holdings, liquor licenses, p   | orofessional license         | <b>∋s</b>   |
| Money or                | property owed to you?   |                                  |                                      |  |                              | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. <b>Tax re</b>       | efunds owed to you  |                                  |                                      |  |                              |   |
| _                       | . Give specific information al  | bout them, in                    | cluding whether you alre             | ady filed the returns and the  | e tax years                  |   |
|                         |   |                                  |                                      |  | Federal                      | \$3.819.00  |

Official Form 106A/B Schedule A/B: Property page 4

Case 16-40009 Doc 1 Filed 12/21/16 Entered 12/21/16 11:42:57 Desc Main Document Page 14 of 48 Case number (if known) Debtor 1 Barbara M Alluri 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim........ 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$4.819.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

53. Do you have other property of any kind you did not already list?

Describe All Property You Own or Have an Interest in That You Did Not List Above

Examples: Season tickets, country club membership

No

Part 7:

☐ Yes. Give specific information.......

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Case number (if known)

Document Debtor 1 Barbara M Alluri

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$56,382.00 Part 2: Total vehicles, line 5 56. \$1,880.00 Part 3: Total personal and household items, line 15 57. \$250.00 58. Part 4: Total financial assets, line 36 \$4,819.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... 62. \$6,949.00 Copy personal property total \$6,949.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$63,331.00

Official Form 106A/B page 6 Schedule A/B: Property

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|                     |                          | Ducume            | TIL PAUE 10 01 40 |                                      |
|---------------------|--------------------------|-------------------|-------------------|--------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |                   |                                      |
| Debtor 1            | Barbara M Alluri         |                   |                   |                                      |
|                     | First Name               | Middle Name       | Last Name         |                                      |
| Debtor 2            |                          |                   |                   |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name         |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS       |                                      |
| Case number         |                          |                   |                   |                                      |
| (if known)          |                          |                   |                   | ☐ Check if this is an amended filing |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the | Property | You Claim | as Exempt |
|---------|--------------|----------|-----------|-----------|
|---------|--------------|----------|-----------|-----------|

| <ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing y</li> </ol> | with vou. |
|---|-----------|
|---|-----------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amo                  | ount of the exemption you claim                                 | Specific laws that allow exemption   |
|--------------------------------------|----------------------|---|--|
| Copy the value from<br>Schedule A/B  | Che                  | ck only one box for each exemption.                             |  |
| \$56,382.00                          |                      | \$15,000.00   | 735 ILCS 5/12-901  |
|                                      |                      | 100% of fair market value, up to any applicable statutory limit |  |
| \$1,880.00                           |                      | \$1,880.00  | 735 ILCS 5/12-1001(c)  |
|                                      |                      | 100% of fair market value, up to any applicable statutory limit |  |
| \$100.00                             |                      | \$100.00  | 735 ILCS 5/12-1001(b)  |
|                                      |                      | 100% of fair market value, up to any applicable statutory limit |  |
| \$50.00                              |                      | \$50.00   | 735 ILCS 5/12-1001(b)  |
|                                      |                      | 100% of fair market value, up to any applicable statutory limit |  |
| \$100.00                             |                      | \$100.00  | 735 ILCS 5/12-1001(a)  |
|                                      |                      | 100% of fair market value, up to any applicable statutory limit |  |
|                                      | \$1,880.00 \$1,00.00 | \$1,880.00 \$100.00 \$100.00 \$100.00 \$100.00                  | \$56,382.00  \$15,000.00  \$100% of fair market value, up to any applicable statutory limit  \$1,880.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit  \$50.00  \$100% of fair market value, up to any applicable statutory limit  \$100.00  \$100% of fair market value, up to any applicable statutory limit |

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|          | ef description of the property and line on hedule A/B that lists this property | Current value of the portion you own   | Amo     | ount of the exemption you claim                                 | Specific laws that allow exemption |  |  |
|----------|--|--|---------|---|------------------------------------|--|--|
|          |  | Copy the value from Schedule A/B   | Che     | ck only one box for each exemption.                             |                                    |  |  |
|          | necking: Chase<br>ne from <i>Schedule A/B</i> : <b>17.1</b>                    | \$1,000.00   | -       | \$100.00  | 735 ILCS 5/12-1001(b)              |  |  |
|          | io Ironi Gonedale AVB. 1711  |  |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|          | ension: Graphic Communications   | Unknown  |         | \$0.00  | 735 ILCS 5/12-704                  |  |  |
| Br<br>Pe | otherhood of Teamsters National<br>ension Fund<br>5 Kehoe Boulevard, Ste. 101  | nerhood of Teamsters National 100% of fair market value, up any applicable statutory limit |         |   |                                    |  |  |
|          | arol Stream, IL 60188<br>ne from Schedule A/B: 21.1                            |  |         |   |                                    |  |  |
|          | ension: Inter-Local Pension Fund<br>5 Kehoe Blvd., Ste. 100                    | Unknown  |         | \$0.00  | 735 ILCS 5/12-704                  |  |  |
| Ca       | arol Stream, IL 60188<br>he from Schedule A/B: 21.2                            |  |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|          | ederal:  | \$3,819.00   |         | \$3,750.00  | 735 ILCS 5/12-1001(b)              |  |  |
| LIII     | le Holli Schedule A.B. 20.1  |  |         | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |
|          | e you claiming a homestead exemption ubject to adjustment on 4/01/19 and every |  |         | led on or after the date of adjustme                            | nt.)                               |  |  |
| _        | Yes. Did you acquire the property cover  | ed by the exemption wi   | ithin 1 | ,215 days before you filed this case                            | ?                                  |  |  |
|          | □ No   |  |         |   |                                    |  |  |
|          | □ Yes  |  |         |   |                                    |  |  |

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| Fill in this infor  | mation to identify your  | case:             |             |                       |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1            | Barbara M Alluri         |                   |             |                       |
|                     | First Name               | Middle Name       | Last Name   |                       |
| Debtor 2            |                          |                   |             |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |                       |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                       |
| Case number         |                          |                   |             |                       |
| (if known)          |                          |                   |             | ☐ Check if this is an |
|                     |                          |                   |             | amended filing        |

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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Page 19 of 48 Document Fill in this information to identify your case: Debtor 1 Barbara M Alluri Middle Name First Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 Last 4 digits of account number 2833 \$7,691.00 Amex Nonpriority Creditor's Name Opened 04/02 Last Active Correspondence Po Box 981540 When was the debt incurred? 8/07/15 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

Best Case Bankruptcy

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Debtor 1 Barbara M Alluri Case number (if know) 4.2 **Bank Of America** Last 4 digits of account number 3838 \$4.243.00 Nonpriority Creditor's Name Nc4-105-03-14 Opened 02/06 Last Active When was the debt incurred? 11/09/16 Po Box 26012 Greensboro, NC 27410 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Chase Card** Last 4 digits of account number 9801 \$4,009.00 Nonpriority Creditor's Name Attn: Correspondence Opened 06/11 Last Active Po Box 15298 When was the debt incurred? 11/14/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 Citibank Last 4 digits of account number \$10,404.00 9117 Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 04/99 Last Active **Bankrup** When was the debt incurred? 7/15/16 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

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Page 21 of 48 Document Debtor 1 Barbara M Alluri Case number (if know)

| 4.5          | Discover Financial  | Last 4 digits of account number  | 5966   | \$5,138.00                   |  |  |  |  |  |  |  |
|--------------|---|--|--|------------------------------|--|--|--|--|--|--|--|
|              | Nonpriority Creditor's Name  Po Box 3025  New Albany, OH 43054  | When was the debt incurred?  | When was the debt incurred?  Opened 12/86 Last Active 10/18/16   |                              |  |  |  |  |  |  |  |
|              | Number Street City State Zlp Code   | As of the date you file, the claim   | As of the date you file, the claim is: Check all that apply  |                              |  |  |  |  |  |  |  |
|              | Who incurred the debt? Check one.   |  |  |                              |  |  |  |  |  |  |  |
|              | ■ Debtor 1 only   | ☐ Contingent   |  |                              |  |  |  |  |  |  |  |
|              | Debtor 2 only   | ☐ Unliquidated   |  |                              |  |  |  |  |  |  |  |
|              | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   | Disputed   |                              |  |  |  |  |  |  |  |
|              | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |  |                              |  |  |  |  |  |  |  |
|              | ☐ Check if this claim is for a community  | ☐ Student loans  |  |                              |  |  |  |  |  |  |  |
|              | debt Is the claim subject to offset?  | ☐ Obligations arising out of a sep report as priority claims                               | <ul> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> </ul> |                              |  |  |  |  |  |  |  |
|              | No  | Debts to pension or profit-shari   |  |                              |  |  |  |  |  |  |  |
|              | Yes   | Other. Specify Credit Care   | d  |                              |  |  |  |  |  |  |  |
| Part :       | 3: List Others to Be Notified About a D   | ebt That You Already Listed  |  |                              |  |  |  |  |  |  |  |
| is tr<br>hav | this page only if you have others to be notified<br>ying to collect from you for a debt you owe to se<br>e more than one creditor for any of the debts the<br>fied for any debts in Parts 1 or 2, do not fill out | someone else, list the original creditor i<br>nat you listed in Parts 1 or 2, list the add | n Parts 1 or 2, then list the collection ag  | ency here. Similarly, if you |  |  |  |  |  |  |  |
|              | and Address   | On which entry in Part 1 or Part 2 did you   | u list the original creditor?  |                              |  |  |  |  |  |  |  |
|              | & Gaines, PC  | Line 4.1 of (Check one):   | Part 1: Creditors with Priority Unsecured  | Claims                       |  |  |  |  |  |  |  |
| 100          | W. Glenn Avenue   |  | Part 2: Creditors with Nonpriority Unsecu  | ured Claims                  |  |  |  |  |  |  |  |

### Part 4: Add the Amounts for Each Type of Unsecured Claim

Wheeling, IL 60090

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

2983

|              |     |   |     | 7  | Total Claim |
|--------------|-----|---|-----|----|-------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|              |     |   |     | 1  | Total Claim |
|              | 6f. | Student loans   | 6f. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 31,485.00   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 31,485.00   |

Last 4 digits of account number

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Fill in this information to identify your case: Debtor 1 Barbara M Alluri Middle Name First Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | Company with<br>Name, Number | whom you have the street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     |   |
|     | City      |                              | State   | ZIP Code            | <u> </u>                                |
| 2.2 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     |   |
|     | City      |                              | State   | ZIP Code            | _                                       |
| 2.3 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | <u> </u>                                |
|     | City      |                              | State   | ZIP Code            | <del>_</del>                            |
| 2.4 | <u> </u>  |                              |   |                     |   |
|     | Name      |                              |   |                     | _                                       |
|     | Number    | Street                       |   |                     | _                                       |
|     | City      |                              | State   | ZIP Code            | _                                       |
| 2.5 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | <u> </u>                                |
|     | City      |                              | State   | ZIP Code            |   |

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|                               |   | Docume  | ent Page 23 d                              | of 48   |             |
|-------------------------------|---|---|--|---|-------------|
| Fill in this                  | information to identify your  | case:   |  |   |             |
| Debtor 1                      | Barbara M Alluri  |   |  |   |             |
| 20010                         | First Name  | Middle Name   | Last Name                                  |   |             |
| Debtor 2                      |   |   |  |   |             |
| (Spouse if, filin             | ng) First Name  | Middle Name   | Last Name                                  |   |             |
| United Stat                   | tes Bankruptcy Court for the:   | NORTHERN DISTRICT                                   | OF ILLINOIS                                |   |             |
| Case numb                     | ner .   |   |  |   |             |
| (if known)                    |   |   |  | ☐ Check if this is  | s an        |
|                               |   |   |  | amended filing  | g           |
|                               | . =   |   |  |   |             |
| Official                      | l Form 106H   |   |  |   |             |
| Sched                         | ule H: Your Code  | ebtors  |  |   | 12/15       |
|                               |   |   |  |   |             |
| our name                      | and case number (if known).   | . Answer every question                             |  | o this page. On the top of any Additional Page  | s, write    |
| 1. Do y                       | you have any codebtors? (If y   | ou are filing a joint case,                         | do not list either spouse                  | as a codebtor.  |             |
| ■ No                          |   |   |  |   |             |
| ☐ Yes                         |   |   |  |   |             |
| Arizona                       | nin the last 8 years, have you<br>a, California, Idaho, Louisiana,<br>Go to line 3.<br>. Did your spouse, former spou | Nevada, New Mexico, Pu                              | erto Rico, Texas, Wash                     | y? (Community property states and territories inclington, and Wisconsin.)   | lude        |
| 3. In Colu<br>in line<br>Form | umn 1, list all of your codebto<br>2 again as a codebtor only if  | ors. Do not include your<br>that person is a guaran | spouse as a codebtor tor or cosigner. Make | if your spouse is filing with you. List the pers<br>sure you have listed the creditor on Schedule<br>6G). Use Schedule D, Schedule E/F, or Schedu | D (Official |
| (                             | Column 1: Your codebtor   |   |  | Column 2: The creditor to whom you owe  | the debt    |
|                               | Name, Number, Street, City, State and Zll   | P Code  |  | Check all schedules that apply:   | tile debt   |
|                               |   |   |  | <u>_</u>  |             |
| 3.1                           | Nome  |   |  | Schedule D, line  |             |
| ,                             | Name  |   |  | Schedule E/F, line  |             |
|                               |   |   |  | ☐ Schedule G, line  |             |
|                               | Number Street   |   |  | _   |             |
| (                             | City  | State   | ZIP Code                                   |   |             |
|                               |   |   |  | Contrada D. Fra   |             |
| 3.2                           | Name  |   |  | ☐ Schedule D, line  |             |
|                               |   |   |  | ☐ Schedule E/F, line  |             |
|                               |   |   |  | ☐ Schedule G, line  |             |
|                               | Number Street   | 01-1-   | 710.0                                      |   |             |
| (                             | City  | State   | ZIP Code                                   |   |             |

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|                    | in this information to identify your   | 200:   |   |              |                | I                                |             |                        |                             |                   |
|--------------------|--|--|---|--------------|----------------|----------------------------------|-------------|------------------------|-----------------------------|-------------------|
|                    | in this information to identify your captor 1  Barbara M A   |  |   |              |                |                                  |             |                        |                             |                   |
|                    | otor 2   |  |   |              | _              |                                  |             |                        |                             |                   |
| Uni                | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC                                   | CT OF ILLINOIS                                |              | _              |                                  |             |                        |                             |                   |
|                    | se number  |  | -   |              |                |                                  | nded        | nt showin              | ng postpetitio              |                   |
| O                  | fficial Form 106I  |  |   |              |                | MM / DI                          |             |                        | onoming date                | •                 |
| S                  | chedule I: Your Inc  | ome  |   |              |                | WIIWI / DI                       | , ,         |                        |                             | 12/15             |
| sup<br>spo<br>atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not fili<br>r spouse is not filing w | ng jointly, and your<br>ith you, do not inclu | spouse is    | s liv<br>natio | ing with you, i<br>on about your | nclu<br>spo | de infori<br>use. If m | mation abou<br>ore space is | t your<br>needed, |
| 1.                 | Fill in your employment information.   |  | Debtor 1                                      |              |                | Debt                             | or 2        | or non-f               | iling spouse                |                   |
|                    | If you have more than one job,   | Employment status                                    | ☐ Employed                                    |              |                | □ Er                             | nplo        | yed                    |                             |                   |
|                    | attach a separate page with<br>information about additional<br>employers.  | . ,  | ■ Not employed                                |              |                | □ No                             | t en        | nployed                |                             |                   |
|                    | Include part-time, seasonal, or self-employed work.  | Occupation Employer's name                           |   |              |                |                                  |             |                        |                             |                   |
|                    | Occupation may include student or homemaker, if it applies.  | Employer's address                                   |   |              |                |                                  |             |                        |                             |                   |
|                    |  | How long employed t                                  | here?   |              |                |                                  |             |                        |                             |                   |
| Par                | t 2: Give Details About Mor  | thly Income  |   |              |                |                                  |             |                        |                             |                   |
|                    | mate monthly income as of the dause unless you are separated.  | ate you file this form. If                           | you have nothing to r                         | eport for a  | any            | line, write \$0 in               | the         | space. In              | clude your no               | on-filing         |
|                    | u or your non-filing spouse have mo<br>e space, attach a separate sheet to   |  | ombine the information                        | on for all e | mplo           | oyers for that pe                | rsor        | on the li              | ines below. If              | you need          |
|                    |  |  |   |              |                | For Debtor 1                     |             |                        | btor 2 or<br>ing spouse     |                   |
| 2.                 | List monthly gross wages, salar deductions). If not paid monthly, or   |  |   | 2.           | \$             | 0.0                              | 0           | \$                     | N/A                         | ·<br>—            |
| 3.                 | Estimate and list monthly overt  | me pay.  |   | 3.           | +\$            | 0.0                              | 0           | +\$                    | N/A                         | <u>-</u>          |
| 4.                 | Calculate gross Income. Add lin  | ne 2 + line 3.                                       |   | 4.           | \$             | 0.00                             |             | \$                     | N/A                         |                   |

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| Deb | tor 1              | Barbara M Alluri   | -          | (         | Case        | number (if kr | own) |             |                      |                  |                 |
|-----|--------------------|--|------------|-----------|-------------|---------------|------|-------------|----------------------|------------------|-----------------|
|     |                    |  |            |           |             | Debtor 1      |      | non-f       | Debtor :<br>filing s | 2 or<br>pouse    |                 |
|     | Cop                | by line 4 here   | 4.         |           | \$_         | C             | 0.00 | \$          |                      | N/A              | -               |
| 5.  | List               | all payroll deductions:  |            |           |             |               |      |             |                      |                  |                 |
|     | 5a.                | Tax, Medicare, and Social Security deductions  | 58         | a.        | \$_         | C             | 0.00 | \$          |                      | N/A              | _               |
|     | 5b.                | Mandatory contributions for retirement plans   | 5b         |           | \$_         |               | 0.00 | \$          |                      | N/A              | _               |
|     | 5c.                | Voluntary contributions for retirement plans   | 50         |           | \$_         |               | 0.00 | \$          |                      | N/A              | =               |
|     | 5d.                | Required repayments of retirement fund loans   | 50         |           | \$_         |               | 0.00 | \$          |                      | N/A              | -               |
|     | 5e.<br>5f.         | Insurance  Demostic support obligations  | 5e<br>5f   |           | \$_<br>\$   |               | 0.00 | \$          |                      | N/A              | -               |
|     | 5i.<br>5g.         | Domestic support obligations Union dues  | 5 <u>0</u> |           | \$<br>_     |               | 0.00 | \$          |                      | N/A<br>N/A       | -               |
|     | 5h.                | Other deductions. Specify:   | -          | ง.<br>า.+ | <u>\$</u> _ |               |      | + \$        |                      | N/A              | -               |
| 6.  | Add                | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | _<br>6.    |           | \$          |               | 0.00 | \$          |                      | N/A              | -               |
| 7.  |                    | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.         |           | \$<br>\$    |               | 0.00 | \$          |                      | N/A              | -               |
| 8.  |                    | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                |            |           | _           | -             |      |             |                      |                  | -               |
|     |                    | monthly net income.  | 88         | а.        | \$_         |               | 0.00 | \$          |                      | N/A              | _               |
|     | 8b.                | Interest and dividends   | 8b         | ο.        | \$_         |               | 0.00 | \$          |                      | N/A              | _               |
|     | 8c.                | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 80         | 2.        | \$          | ſ             | 0.00 | \$          |                      | N/A              |                 |
|     | 8d.                | Unemployment compensation  | 80         |           | <b>\$</b> - |               | 0.00 | \$          |                      | N/A              | -               |
|     | 8e.                | Social Security  | 86         |           | \$          | 1,661         |      | \$          |                      | N/A              | -               |
|     | 8f.                | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:    | 8f         |           | \$_         |               | 0.00 | \$          |                      | N/A              | -               |
|     | 8g.<br>8h.         | Pension or retirement income Other monthly income. Specify:  | 80         | g.<br>า.+ | \$_<br>\$   | 1,050         | 0.00 | , <u>\$</u> |                      | N/A<br>N/A       | -               |
|     | OII.               | Other monthly income. Specify:   | _ 01       | 1.+       | Φ_          |               | .00  | + »         |                      | N/A              | -               |
| 9.  | Add                | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.         | . [       | \$          | 2,711         | .80  | \$          |                      | N/A              | <u>\</u>        |
| 10. | Cal                | culate monthly income. Add line 7 + line 9.  | 10.        | \$        |             | 2,711.80      | + \$ |             | N/A                  | = \$             | 2,711.80        |
|     |                    | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |            | ·-        |             | _,            | Ľ    |             |                      |                  | _,              |
| 11. | Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify: | dep        |           |             | •             |      |             | chedule<br>11.       |                  | 0.00            |
| 12. |                    | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies   |            |           |             |               |      |             | 12.                  | \$               | 2,711.80        |
| 13. | Do                 | you expect an increase or decrease within the year after you file this form  | 2          |           |             |               |      |             | L                    | Combir<br>monthl | ned<br>y income |
| 10. |                    | No.  |            |           |             |               |      |             |                      |                  |                 |

Official Form 106I Schedule I: Your Income page 2

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| Fill i      | n this informa             | ition to identify ye               | our case:        |   |                       |                  |                   |                               |
|-------------|----------------------------|------------------------------------|------------------|---|-----------------------|------------------|-------------------|-------------------------------|
| Debt        | tor 2                      | Barbara M A                        | lluri            |   |                       |                  |                   | ving postpetition chapter     |
| ` .         | ouse, if filing)           |                                    |                  |   |                       | ,                | 13 expenses as of | the following date:           |
| Unite       | ed States Bankr            | ruptcy Court for the               | : NORTH          | IERN DISTRICT OF ILLIN  | OIS                   |                  | MM / DD / YYYY    |                               |
| 1           | e number<br>nown)          |                                    |                  |   |                       |                  |                   |                               |
|             |                            | rm 106J                            |                  |   |                       |                  |                   |                               |
|             |                            | J: Your                            |                  |   |                       |                  |                   | 12/15                         |
| info        | rmation. If m              |                                    | eded, atta       | . If two married people ar<br>ch another sheet to this i<br>n.            |                       |                  |                   |                               |
| Part        | 1: Descr                   | ribe Your House                    | hold             |   |                       |                  |                   |                               |
| 1.          | ■ No. Go to                | line 2.                            | in a separ       | ate household?  |                       |                  |                   |                               |
|             | □и                         | 0                                  | ·                | al Form 106J-2, <i>Expenses</i>   | for Separate House    | ehold of Deb     | otor 2.           |                               |
| 2.          | Do you have                | e dependents?                      | ■ No             |   |                       |                  |                   |                               |
|             | Do not list D<br>Debtor 2. | ebtor 1 and                        | ☐ Yes.           | Fill out this information for each dependent                              | Dependent's relation  |                  | Dependent's age   | Does dependent live with you? |
|             | Do not state dependents    |                                    |                  |   |                       |                  |                   | □ No<br>□ Yes                 |
|             | dopondomo                  | namoo.                             |                  |   |                       |                  |                   | □ No                          |
|             |                            |                                    |                  |   |                       |                  |                   | ☐ Yes<br>☐ No                 |
|             |                            |                                    |                  |   |                       |                  |                   | ☐ Yes                         |
|             |                            |                                    |                  |   |                       |                  |                   | □ No                          |
| 3.          | Do your exp                | enses include                      | _                | No  |                       |                  |                   | ☐ Yes                         |
|             |                            | f people other t<br>d your depende | han $_{\square}$ | Yes   |                       |                  |                   |                               |
| Esti<br>exp | imate your ex              |                                    | our bankr        | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |                       |                  |                   |                               |
| the         |                            | h assistance an                    |                  | government assistance it<br>cluded it on <i>Schedule I: Y</i>             |                       |                  | Your exp          | enses                         |
| 4.          |                            | or home owners                     |                  | ses for your residence. In  | nclude first mortgage | e<br>4. S        | \$                | 0.00                          |
|             | If not includ              | led in line 4:                     |                  |   |                       |                  |                   |                               |
|             | 4a. Real e                 | estate taxes                       |                  |   |                       | 4a. S            | \$                | 175.00                        |
|             | 4b. Prope                  | rty, homeowner'                    |                  |   |                       | 4b. S            | \$                | 25.00                         |
|             |                            | maintenance, recowner's associa    |                  | upkeep expenses   |                       | 4c. \$<br>4d. \$ |                   | 100.00<br>889.00              |
| 5.          |                            |                                    |                  | our residence, such as ho   | me equity loans       | 4u. 3            | ·                 | 009.00                        |

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| Debtor 1 B                          | arbara M Alluri  | Case numi | per (if known) |                              |
|-------------------------------------|--|-----------|----------------|------------------------------|
| 6. Utilities:                       | ·  |           |                |                              |
|                                     | ectricity, heat, natural gas   | 6a.       | \$             | 0.00                         |
|                                     | ater, sewer, garbage collection  | 6b.       | \$             | 0.00                         |
|                                     | elephone, cell phone, Internet, satellite, and cable services  | 6c.       | \$             | 105.00                       |
|                                     | ther. Specify:   | 6d.       | \$             | 0.00                         |
|                                     | nd housekeeping supplies   | 7.        | \$             | 500.00                       |
|                                     | re and children's education costs  | 8.        | \$             | 0.00                         |
|                                     | g, laundry, and dry cleaning   | 9.        | \$             | 15.00                        |
| •                                   |  | 9.<br>10. | \$             |                              |
|                                     | al care products and services  |           |                | 50.00                        |
|                                     | and dental expenses  | 11.       | \$             | 125.00                       |
|                                     | ortation. Include gas, maintenance, bus or train fare. Include car payments.   | 12.       | \$             | 100.00                       |
|                                     | nment, clubs, recreation, newspapers, magazines, and books   | 13.       | \$             | 50.00                        |
|                                     | ble contributions and religious donations  | 14.       | \$             | 20.00                        |
|                                     | •  | 14.       | Ψ              | 20.00                        |
| 5. <b>Insuran</b><br>Do not in      | ce. Include insurance deducted from your pay or included in lines 4 or 20.   |           |                |                              |
|                                     | re insurance   | 15a.      | \$             | 0.00                         |
|                                     | ealth insurance  | 15b.      |                | 157.10                       |
|                                     | ehicle insurance   | 15c.      |                | 50.00                        |
|                                     | ther insurance. Specify:   | 15d.      |                | 0.00                         |
|                                     | Oo not include taxes deducted from your pay or included in lines 4 or 20.  | 1JU.      | Ψ              | 0.00                         |
| Specify:                            | 50 not morage taxes deducted from your pay of included in lines 4 of 20.   | 16.       | \$             | 0.00                         |
|                                     | ent or lease payments:   |           | *              | 0.00                         |
|                                     | ar payments for Vehicle 1  | 17a.      | \$             | 0.00                         |
|                                     | ar payments for Vehicle 2  | 17b.      | ·              | 0.00                         |
|                                     | ther. Specify:   | 17c.      |                | 0.00                         |
|                                     | ther. Specify:   | 17d.      | *              | 0.00                         |
|                                     | yments of alimony, maintenance, and support that you did not report a  |           | Ψ              | 0.00                         |
|                                     | d from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106)  |           | \$             | 0.00                         |
|                                     | ayments you make to support others who do not live with you.   | ,.        | \$             | 0.00                         |
| Specify:                            | ,  | 19.       |                |                              |
| , ,                                 | eal property expenses not included in lines 4 or 5 of this form or on Sc   |           | ur Income.     |                              |
|                                     | ortgages on other property   | 20a.      |                | 0.00                         |
| 20b. Re                             | eal estate taxes   | 20b.      | \$             | 0.00                         |
| 20c. Pr                             | roperty, homeowner's, or renter's insurance  | 20c.      | \$             | 0.00                         |
|                                     | aintenance, repair, and upkeep expenses  | 20d.      | \$             | 0.00                         |
|                                     | omeowner's association or condominium dues   | 20e.      | ·              | 0.00                         |
| 1. Other: S                         |  | 21.       |                | 100.00                       |
| • • • • • • • • • • • • • • • • • • | resonations in teaching in the second in the |           | · <del>V</del> | 100.00                       |
|                                     | te your monthly expenses   |           |                |                              |
|                                     | d lines 4 through 21.  |           | \$             | 2,461.10                     |
| 22b. Cop                            | by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  | 2         | \$             |                              |
| 22c. Add                            | l line 22a and 22b. The result is your monthly expenses.   |           | \$             | 2,461.10                     |
|                                     |  |           | · <del></del>  | _,                           |
|                                     | te your monthly net income.  |           | _              |                              |
|                                     | opy line 12 (your combined monthly income) from Schedule I.  | 23a.      |                | 2,711.80                     |
| 23b. Co                             | opy your monthly expenses from line 22c above.   | 23b.      | -\$            | 2,461.10                     |
|                                     |  |           |                |                              |
|                                     | ubtract your monthly expenses from your monthly income.  | 006       | ¢              | 250.70                       |
| Th                                  | ne result is your monthly net income.  | 23c.      | \$             | 230.10                       |
| For exam                            | expect an increase or decrease in your expenses within the year after ple, do you expect to finish paying for your car loan within the year or do you expect you not the terms of your mortgage?   |           |                | ase or decrease because of a |
| ☐ Yes.                              | Explain here:  |           |                |                              |

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| Fill in this info   | rmation to identify your                        | case:                    |                            |   |  |
|---------------------|---|--------------------------|----------------------------|---|--|
| Debtor 1            | Barbara M Alluri                                |                          |                            |   |  |
| Debior 1            | First Name                                      | Middle Name              | Last Name                  |   |  |
| Debtor 2            |   |                          |                            |   |  |
| (Spouse if, filing) | First Name                                      | Middle Name              | Last Name                  |   |  |
| United States B     | sankruptcy Court for the:                       | NORTHERN DISTRICT        | OF ILLINOIS                |   |  |
| Case number         |   |                          |                            |   |  |
| (if known)          |   |                          |                            |   | ☐ Check if this is an amended filing                           |
| obtaining mone      |   | n connection with a bank |                            | s. Making a false statement<br>in fines up to \$250,000, or i |  |
| Sig                 | gn Below  |                          |                            |   |  |
| Did you p           | ay or agree to pay some                         | one who is NOT an attor  | ney to help you fill out l | bankruptcy forms?   |  |
| ■ No                |   |                          |                            |   |  |
| ☐ Yes.              | Name of person                                  |                          |                            |   | y Petition Preparer's Notice,<br>Signature (Official Form 119) |
| •                   | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules file    | ed with this declaration and                                  | I  |
| X /s/ Ba            | rbara M Alluri                                  |                          | X                          |   |  |
|                     | ara M Alluri                                    |                          | Signature of               | f Debtor 2  |  |
| Signati             | ure of Debtor 1                                 |                          |                            |   |  |
| Date                | December 20, 2016                               |                          | Date                       |   |  |

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| Fil              | ll in this inforr            | mation to identify you   | r case:  |   |   |   |  |  |  |
|------------------|------------------------------|--|--|---|---|---|--|--|--|
| De               | ebtor 1                      | Barbara M Alluri   |  |   |   |   |  |  |  |
| _                | abtor O                      | First Name   | Middle Name  | Last Name   |   |   |  |  |  |
|                  | ebtor 2<br>oouse if, filing) | First Name   | Middle Name  | Last Name   |   |   |  |  |  |
| Ur               | nited States Ba              | ankruptcy Court for the:   | NORTHERN DISTRICT C  | )F ILLINOIS   |   |   |  |  |  |
| Ca               | ase number                   |  |  |   |   |   |  |  |  |
|                  | known)                       |  |  |   |   | Check if this is an amended filing                    |  |  |  |
|                  |                              |  |  |   |   | amended ming  |  |  |  |
| $\sim$           | fficial Fa                   | mo 107   |  |   |   |   |  |  |  |
|                  | fficial Fo                   |  | Accessor Complements   |   | <b>.</b>                                |   |  |  |  |
| Si               | tatement                     | of Financial   | Affairs for Individ  | Juais Filing for E                                    | Bankruptcy                              | 4/1   |  |  |  |
|                  |                              |  | ble. If two married people a attach a separate sheet to                                      |   |   |   |  |  |  |
|                  |                              | n). Answer every ques  |  | mis form. On the top of ar                            | iy additional pages, writ               | e your name and case                                  |  |  |  |
| Ρź               | art 1: Give I                | Details About Your Ma  | rital Status and Where You   | Lived Refore  |   |   |  |  |  |
| 1.               |                              |  |  | Lived Belofe  |   |   |  |  |  |
| ١.               | wilat is you                 | What is your current marital status?   |  |   |   |   |  |  |  |
|                  | ☐ Married                    | I  |  |   |   |   |  |  |  |
|                  | Not ma                       | rried  |  |   |   |   |  |  |  |
| 2.               | During the I                 | ast 3 years, have you  | lived anywhere other than  | where you live now?                                   |   |   |  |  |  |
|                  | П №                          |  |  |   |   |   |  |  |  |
|                  | _                            | <ul><li>□ No</li><li>■ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul> |  |   |   |   |  |  |  |
|                  |                              | . ,  | ·  | •   |   |   |  |  |  |
|                  | Debtor 1 Pi                  | rior Address:  | Dates Debtor 1 lived there   | Debtor 2 Prior A                                      | ddress:                                 | Dates Debtor 2<br>lived there                         |  |  |  |
|                  |                              | d Hills Road   | From-To:   | ☐ Same as Debtor                                      | 1                                       | ☐ Same as Debtor 1                                    |  |  |  |
|                  | Huntley, I                   | L 60142  | 4/2006 - 12/20   | 15  |   | From-To:  |  |  |  |
|                  |                              |  |  |   |   |   |  |  |  |
| <b>3.</b><br>sta |                              |  | <b>/er live with a spouse or leg</b><br>lifornia, Idaho, Louisiana, Nev                      |   |   |   |  |  |  |
|                  | <b>.</b>                     |  |  |   |   |   |  |  |  |
|                  | ■ No<br>□ Yes. Ma            | ake sure vou fill out <i>Sch</i>   | nedule H: Your Codebtors (Of   | ificial Form 106H)                                    |   |   |  |  |  |
|                  |                              | and sure you iii out oci   | icadic 11. Todi Godebiois (Oi  | nciai i oiiii iooiij.                                 |   |   |  |  |  |
| Pa               | art 2 Expla                  | in the Sources of You  | r Income   |   |   |   |  |  |  |
| _                | Did you have                 | vo any incomo from an  | anloyment or from energtin   | a a business during this y                            | year or the two provious                | colondar voors?                                       |  |  |  |
| 4.               | Fill in the tota             | al amount of income yo   | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including par                         | t-time activities.                      | calendar years?                                       |  |  |  |
|                  | ■ No                         |  |  |   |   |   |  |  |  |
|                  | _                            | Il in the details.   |  |   |   |   |  |  |  |
|                  |                              |  | Dobtor 1   |   | Dobtor 2                                |   |  |  |  |
|                  |                              |  | Debtor 1   | Gross income  | Debtor 2                                | Grace income  |  |  |  |
|                  |                              |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |  |  |  |

Case 16-40009 Doc 1 Filed 12/21/16 Entered 12/21/16 11:42:57 Desc Main Page 30 of 48 Document Case number (if known) Debtor 1 Barbara M Alluri Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income **Gross income** Gross income from Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until SSI Benefits \$19,941.60 the date you filed for bankruptcy: **Retirement Income** \$12,600.00 For last calendar year: Retirement Income \$16,424.00 (January 1 to December 31, 2015) **SSI Benefits** \$19,981.00 For the calendar year before that: SSI Benefits \$21,443.00 (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?  $\square$  No. Go to line 7. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and

alimony.

Yes. List all payments to an insider.

**Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe

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Document Page 31 of 48 Debtor 1 Barbara M Alluri Case number (if known) Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address **Total amount** Amount you Reason for this payment Dates of payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Collection American Express v. Alluri **Kane County Court House** Pending 16 SC 2983 100 S. Third St □ On appeal Geneva, IL 60134 □ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Nο

Yes. Fill in the details for each gift.

per person Person to Whom You Gave the Gift and Address:

Gifts with a total value of more than \$600

Describe the gifts

Dates you gave the gifts

Value

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Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid **Address** 

Description and value of any property transferred

Date payment or transfer was made

Amount of payment Case 16-40009 Doc 1 Filed 12/21/16 Entered 12/21/16 11:42:57 Desc Main Document

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| 1<br> | Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already look or No  | iness or financial affa<br>e as security (such as t                            | iirs?<br>he granting of a |                         |   |   |  |  |
|-------|--|--|---------------------------|-------------------------|---|---|--|--|
|       | Yes. Fill in the details.  |  |                           |                         |   |   |  |  |
|       | Person Who Received Transfer<br>Address  | Description and v property transferr   |                           | paymo                   | ibe any property or<br>ents received or debts<br>n exchange                                       | Date transfer was made                        |  |  |
|       | Person's relationship to you   |  |                           |                         |   |   |  |  |
|       | Judith McShane and Jill Bier<br>14080 Red Hills Road<br>Huntley, IL 60142<br>none  | Home located a<br>Hills Road, Hun<br>was sold to Ms.<br>and Ms. Bier for       | tley, Illinois<br>McShane | Red I<br>Illino<br>McSh | e located at 14080<br>Hills Road, Huntley,<br>is was sold to Ms.<br>nane and Ms. Bier<br>170,000. | 12/23/15                                      |  |  |
|       |  |  |                           |                         | ,   |   |  |  |
|       | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.   |  |                           |                         |   |   |  |  |
|       | Name of trust  | Description and value of the property transferred                              |                           | sferred                 | Date Transfer was made  |   |  |  |
|       |  |  |                           |                         |   |   |  |  |
| 20.   | List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage |  |                           |                         |   |   |  |  |
| I     | houses, pension funds, cooperatives, associations, and other financial institutions.   |  |                           |                         |   |   |  |  |
| l     | No   |  |                           |                         |   |   |  |  |
| I     | Yes. Fill in the details.  |  |                           |                         |   |   |  |  |
|       |  | ast 4 digits of ccount number  |                           |                         | Date account was<br>closed, sold,<br>moved, or<br>transferred                                     | Last balance<br>before closing or<br>transfer |  |  |
|       | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?   |  |                           |                         |   |   |  |  |
| 1     | ■ No   |  |                           |                         |   |   |  |  |
|       | No   |  |                           |                         |   |   |  |  |
|       | Yes. Fill in the details.  |  |                           |                         |   |   |  |  |
|       | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   | Who else had access to it?  Address (Number, Street, City, State and ZIP Code) |                           | Describe                | the contents  | Do you still have it?                         |  |  |
| 22. l | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  |  |                           |                         |   |   |  |  |
|       | No   |  |                           |                         |   |   |  |  |
|       | Yes. Fill in the details.  |  |                           |                         |   |   |  |  |
|       | Name of Storage Facility   | Who else has or h  | ad access                 | Describe                | the contents  | Do you still                                  |  |  |
|       | Address (Number, Street, City, State and ZIP Code)   | to it? Address (Number, Street, City, State and ZIP Code)                      |                           |                         |   | have it?                                      |  |  |

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| Par | t 9: Identify Property You Hold or Control for   | Someone Else  |  |                       |  |  |  |  |
|-----|--|---|--|-----------------------|--|--|--|--|
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. |   |  |                       |  |  |  |  |
|     | No   |   |  |                       |  |  |  |  |
|     | Yes. Fill in the details.  |   |  |                       |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Describe the property                  | Value                 |  |  |  |  |
| Par | t 10: Give Details About Environmental Inform  | ation   |  |                       |  |  |  |  |
| For | the purpose of Part 10, the following definitions  | apply:  |  |                       |  |  |  |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su    | ir, land, soil, surface water, groun                                      | - ·                                    |                       |  |  |  |  |
| _   | Site means any location, facility, or property as to own, operate, or utilize it, including disposal   | -   | law, whether you now own, operate,     | or utilize it or used |  |  |  |  |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or  |   | s waste, hazardous substance, toxic s  | substance,            |  |  |  |  |
| Rep | ort all notices, releases, and proceedings that y  | ou know about, regardless of whe  | n they occurred.                       |                       |  |  |  |  |
| 24. | Has any governmental unit notified you that yo   | u may be liable or potentially liable                                     | e under or in violation of an environm | ental law?            |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |  |                       |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it      | Date of notice        |  |  |  |  |
| 25. | Have you notified any governmental unit of any release of hazardous material?  |   |  |                       |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |  |                       |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it      | Date of notice        |  |  |  |  |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.                    |   |  |                       |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |  |                       |  |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case                     | Status of the case    |  |  |  |  |
| Par | t 11: Give Details About Your Business or Con  | nections to Any Business  |  |                       |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?                   |   |  |                       |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time                                      |   |  |                       |  |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |   |  |                       |  |  |  |  |
|     | ☐ A partner in a partnership   |   |  |                       |  |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation   |   |  |                       |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |   |  |                       |  |  |  |  |

Case 16-40009 Doc 1 Filed 12/21/16 Entered 12/21/16 11:42:57 Page 35 of 48 Document Debtor 1 Barbara M Alluri Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Barbara M Alluri Signature of Debtor 2 Barbara M Alluri Signature of Debtor 1 Date December 20, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person ... Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No
□ Yes

■ No

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$1,918.40 toward the flat fee, leaving a balance due of \$2,081.60; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: <u>December 20, 2016</u>           |                            |  |
|--|----------------------------|--|
| Signed:                                  |                            |  |
| /s/ Barbara M Alluri                     | /s/ Maura G. Zalc #        |  |
| Barbara M Alluri                         | Maura G. Zalc # 6307384    |  |
|  | Attorney for the Debtor(s) |  |
| Debtor(s)                                |                            |  |
| Do not sign this agreement if the amount | unts are blank.            |  |

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Northern District of Illinois

|       | 1  | orthern District of Inhiois              |   |  |
|-------|--|--|---|--|
| In re | Barbara M Alluri   |  | Case No.                                |  |
|       |  | Debtor(s)                                | Chapter                                 | 13   |
|       | DISCLOSURE OF COMP   | ENSATION OF ATTO                         | RNEY FOR DE                             | EBTOR(S)   |
|       | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the f be rendered on behalf of the debtor(s) in contemplation  | iling of the petition in bankruptcy,     | or agreed to be paid                    | to me, for services rendered or to               |
|       | For legal services, I have agreed to accept  |  | \$                                      | 4,000.00   |
|       | Prior to the filing of this statement I have received  | ed                                       | \$                                      | 1,918.40   |
|       | Balance Due  |  | \$                                      | 2,081.60   |
| 2.    | The source of the compensation paid to me was:   |  |   |  |
|       | ☐ Debtor ☐ Other (specify): <b>Jan</b>   | nes Hatch, cousin of debtor.             |   |  |
| 3.    | The source of compensation to be paid to me is:  |  |   |  |
|       | ■ Debtor □ Other (specify):  |  |   |  |
| 4.    | ■ I have not agreed to share the above-disclosed co  | mpensation with any other person         | unless they are mem                     | bers and associates of my law firm               |
|       | ☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the   |  |   |  |
| 5.    | In return for the above-disclosed fee, I have agreed to  | render legal service for all aspect      | ts of the bankruptcy c                  | ase, including:                                  |
|       | <ul> <li>a. Analysis of the debtor's financial situation, and res</li> <li>b. Preparation and filing of any petition, schedules, s</li> <li>c. Representation of the debtor at the meeting of cred</li> </ul>  | tatement of affairs and plan which       | n may be required;                      |  |
|       | d. [Other provisions as needed]  Negotiations with secured creditors to reaffirmation agreements and applica 522(f)(2)(A) for avoidance of liens on the secure of the secu | tions as needed; preparation             | emption planning;<br>and filing of moti | preparation and filing of ons pursuant to 11 USC |
| 6.    | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.  |  |   | es, relief from stay actions or                  |
|       |  | CERTIFICATION                            |   |  |
|       | I certify that the foregoing is a complete statement of pankruptcy proceeding.   | any agreement or arrangement for         | payment to me for re                    | epresentation of the debtor(s) in                |
|       | December 20, 2016  | /s/ Maura G. Zalc                        | #                                       |  |
| _     | Date   | Maura G. Zalc # 6                        | 307384                                  |  |
|       |  | Signature of Attorne<br>Bernicky Law Fir |   |  |
|       |  | 1001 E. Chicago                          |   |  |
|       |  | Suite 121<br>Naperville, IL 605          | 540                                     |  |
|       |  | 630-909-9902 Fa                          | x: 630-914-6946                         |  |
|       |  | info@BernickvLa                          | w.com                                   |  |

Name of law firm

#### United States Bankruptcy Court Northern District of Illinois

| In re | Barbara M Alluri                           |   | Case No.        |                           |
|-------|--|---|-----------------|---------------------------|
|       |  | Debtor(s)                               | Chapter         | 13                        |
|       | VE   | CRIFICATION OF CREDITOR M               | ATRIX           |                           |
|       |  | Number of                               | Creditors:      | 6                         |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credit | ors is true and | correct to the best of my |
|       |  |   |                 |                           |

Amex Correspondence Po Box 981540 El Paso, TX 79998

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Blitt & Gaines, PC 661 W. Glenn Avenue Wheeling, IL 60090

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850

Citibank Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Discover Financial Po Box 3025 New Albany, OH 43054